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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's	Shawntora	
		First name	First name
	license or passport).	Middle name	Middle name
	Bring your picture identification to your meeting with the trustee.	Harvey	
		Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-8001	

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Case number (if known)

Debtor 1 Shawntora Harvey

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Business name(s)			
		EINs	EINs			
5.	Where you live	5029 Harbor Ln Richton Park, IL 60471	If Debtor 2 lives at a different address:			
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Cook County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for	Check one:	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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Case number (if known) Debtor 1 Shawntora Harvey

Par	t 2: Tell the Court About	Your B	ankruptcy Ca	ise				
7. The chapter of the Bankruptcy Code you are choosing to file under Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individual (Form 2010)). Also, go to the top of page 1 and check the appropriate box.			tcy					
	choosing to file under	■ C	hapter 7					
		□с	hapter 11					
		□с	hapter 12					
		□с	hapter 13					
3.	How you will pay the fee		about how yo	u may pay. Typio attorney is subm	cally, if you are paying the fee yo	ck with the clerk's office in your local court for more dourself, you may pay with cash, cashier's check, or nalf, your attorney may pay with a credit card or chec	noney	
☐ I need to pay the fee in in The Filing Fee in Installme						on, sign and attach the Application for Individuals to	Pay	
			I request tha	est that my fee be waived (You may request this option only if you are filing for Chapter 7. By				
						our income is less than 150% of the official poverty li n installments). If you choose this option, you must fi		
						cial Form 103B) and file it with your petition.		
).	Have you filed for bankruptcy within the	■ No						
	last 8 years?	□Y€			Whon	Coop number		
			District District		When When	Case number Case number		
			District		When	Case number Case number		
			2.0					
10.	Are any bankruptcy	■ No)					
	cases pending or being filed by a spouse who is	□ Ye						
	not filing this case with you, or by a business partner, or by an affiliate?							
			Debtor			Relationship to you		
			District		When	Case number, if known		
			Debtor			Relationship to you		
			District		When	Case number, if known		
			0 1 1					
11.	Do you rent your residence?	■ No						
		□ Y€	es. Has yo	ur landlord obtai	ned an eviction judgment agains	st you and do you want to stay in your residence?		
				No. Go to line 1				
				Yes. Fill out <i>Init</i> bankruptcy petit		Judgment Against You (Form 101A) and file it with the	nis	

Debtor 1 Shawntora Harvey Document Page 4 of 48 Case number (if known)

ar	Report About Any Bu	sinesses	You Owr	as a Sole Proprietor			
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	art 4.			
		☐ Yes.	Name	and location of business			
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name				
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	r, Street, City, State & ZIP Code			
	it to this petition.		Chec	the appropriate box to describe you	business:		
				Health Care Business (as defined in	n 11 U.S.C. § 101(27A))		
				Single Asset Real Estate (as define	d in 11 U.S.C. § 101(51B))		
				Stockbroker (as defined in 11 U.S.C	c. § 101(53A))		
				Commodity Broker (as defined in 1	U.S.C. § 101(6))		
				None of the above			
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline operation	f you are filing under Chapter 11, the court must know whether you are a small business debtor so that it deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, fin 11 U.S.C. 1116(1)(B).				
	For a definition of small	■ No.	I am r	I am not filing under Chapter 11.			
	business debtor, see 11 U.S.C. § 101(51D).	□ No.		I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.			
		☐ Yes.	I am f	ng under Chapter 11 and I am a sm	all business debtor according to the definition in the Bankruptcy Code.		
ar	t 4: Report if You Own or	Have Any	/ Hazardo	s Property or Any Property That I	Needs Immediate Attention		
14.	Do you own or have any property that poses or is alleged to pose a threat	■ No.					
	of imminent and identifiable hazard to public health or safety? Or do you own any	ifiable hazard to c health or safety?		e hazard?			
	property that needs immediate attention?			ate attention is /hy is it needed?			
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	he property?			
				Number, Street, C	ty, State & Zip Code		

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Debtor 1 Shawntora Harvey

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

Case number (if known)

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 17-14292 Doc 1 Filed 05/05/17 Entered 05/05/17 18:47:27 Desc Main Document Page 6 of 48 Case number (if known) Debtor 1 Shawntora Harvey **Answer These Questions for Reporting Purposes** Part 6: 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 □ 200-999 How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50.000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 ☐ More than \$50 billion □ \$100,000,001 - \$500 million □ \$500.001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100.000.001 - \$500 million ■ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Shawntora Harvey Signature of Debtor 2 **Shawntora Harvey**

Executed on

MM / DD / YYYY

Signature of Debtor 1

Executed on May 5, 2017

MM / DD / YYYY

Debtor 1 Shawntora Harvey Document Page 7 of 48 Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Hanna Kayali Signature of Attorney for Debtor	Date	May 5, 2017 MM / DD / YYYY
Hanna Kayali Printed name		
VLO, P.C. Firm name		
3818 S. Harlem Lyons, IL 60534		
Number, Street, City, State & ZIP Code		
Contact phone 312-600-7000	Email address	docs@victorylawoffice.com
6307906 Bar number & State		

		1200:11116	-ni Paue 8 01 48	
Fill in this infor	mation to identify your	case:		
Debtor 1	Shawntora Harve	ey		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Par	11: Summarize Your Assets		
		Your a	ssets f what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	26,819.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	26,819.00
Par	2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	8,020.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	86,029.66
	Your total liabilities	\$	94,049.66
Par	3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	3,415.60
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,472.00
Par	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sch	nedules.
7.	Yes What kind of debt do you have?		
	Vous debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for	a naraanal	family or

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Debtor 1 Shawntora Harvey Document Page 9 of 48 Case number (if known)

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

\$_____5,197.25

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total o	laim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	39,504.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	39,504.00

			Document	Page 10 of 48		
Fill in	this info	rmation to identify your	case and this filing:			
Debto	r 1	Shawntora Harve	ev			
		First Name	Middle Name	Last Name		
Debto		First Name	Middle News	LastNama		
(Spouse	e, if filing)	First Name	Middle Name	Last Name		
United	l States B	ankruptcy Court for the:	NORTHERN DISTRICT OF ILI	LINOIS		
Case	number					☐ Check if this is an
Oasc i	ilallibei			_		☐ Check if this is an amended filing
						3
~ ···		400A/D				
Offic	cial Fo	orm 106A/B				
Sch	nedu	le A/B: Prop	erty			12/15
hink it nforma	fits best. ition. If mo every que	Be as complete and accur- ore space is needed, attachestion.	pe items. List an asset only once. I ate as possible. If two married peo a a separate sheet to this form. On g. Land, or Other Real Estate You	ple are filing together, both ar the top of any additional page	e equally responsible for s	upplying correct
rait i.	Describ	e Lacii Nesidelice, Bullulli	g, Land, or Other Real Estate Four	JWII OI HAVE All IIILEIESLIII		
. Do y	ou own or	have any legal or equitable	e interest in any residence, buildin	g, land, or similar property?		
■ N	o. Go to Pa	art 2.				
		is the property?				
	_	is the property:				
Part 2:	Describ	e Your Vehicles				
B. C ar □ N ■ Y	lo	rucks, tractors, sport u	tility vehicles, motorcycles			
3.1	Make:	Dodge	Who has an interest in	the property? Check one		claims or exemptions. Put
	Model:	Charger	Debtor 1 only	,		red claims on Schedule D: aims Secured by Property.
	Year:	2012	Debtor 2 only		Current value of the	Current value of the
	Approxima	ate mileage: 138	Debtor 1 and Debtor	,	entire property?	portion you own?
-	Other info	rmation:	At least one of the de	btors and another		
			Check if this is com	munity property	\$6,000.00	\$6,000.00
Exal N Y Add.pag	mples: Bo lo les des des des your	ats, trailers, motors, pers lar value of the portion nave attached for Part 2	NTVs and other recreational velonal watercraft, fishing vessels, some of the vessels, some of the following the following state of the fo	snowmobiles, motorcycle ac	y entries for	\$6,000.00 Current value of the portion you own? Do not deduct secured
						claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

□ No

Official Form 106A/B Schedule A/B: Property

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Debtor 1 Shawntora Harvey

				Cash on Hand	\$80.00
17			ounts; certificates of deposit; shas with the same institution, list ea	ares in credit unions, brokerage houses, and ach.	d other similar
	Yes		Institution name:		
		17.1. Checking	Bank of America 065	60	\$89.00
18		or publicly traded stocks investment accounts with bro	okerage firms, money market ac	counts	
	Yes	Institution or issuer	name:		
19	joint venture	ock and interests in incorp	orated and unincorporated bu	sinesses, including an interest in an LLC	C, partnership, and
	■ No □ Yes. Give specific inf	formation about them		% of ownership:	
20	Negotiable instruments Non-negotiable instrum	include personal checks, cas	otiable and non-negotiable ins shiers' checks, promissory notes ansfer to someone by signing or	s, and money orders.	
	■ No □ Yes. Give specific info	ormation about them Issuer name:			
21	. Retirement or pension Examples: Interests in □ No		103(b), thrift savings accounts, o	r other pension or profit-sharing plans	
	Yes. List each accour	nt separately. Type of account:	Institution name:		
		Pension	IMRF		\$20,000.00
22		ed deposits you have made so	o that you may continue service public utilities (electric, gas, wat	er), telecommunications companies, or other	ers
23		or a periodic payment of mone	ey to you, either for life or for a n	number of years)	
	■ No □ Yes Is	suer name and description.		• •	
24	. Interests in an education 26 U.S.C. §§ 530(b)(1),		ualified ABLE program, or und	der a qualified state tuition program.	
	■ No □ YesIn	stitution name and description	n. Separately file the records of	any interests.11 U.S.C. § 521(c):	
25	Trusts, equitable or fu	ture interests in property (o	other than anything listed in lir	ne 1), and rights or powers exercisable fo	or your benefit
	Yes. Give specific inf	ormation about them			
26	Examples: Internet don		nd other intellectual property eds from royalties and licensing a	agreements	
	■ No□ Yes. Give specific inf	ormation about them			

D	ebtor 1	Shawntora Harvey	Document	Page 13 of 48 Case number (if known)	
27	Licens	es, franchises, and other general inta	ngibles		
	Exam	oles: Building permits, exclusive licenses	, cooperative association	n holdings, liquor licenses, professional license	es
	■ No				
	☐ Yes.	Give specific information about them			
M	oney or	property owed to you?			Current value of the
141	oney or	property owed to you:			portion you own? Do not deduct secured claims or exemptions.
28	. Tax re	funds owed to you			
	☐ Yes.	Give specific information about them, in	cluding whether you alre	eady filed the returns and the tax years	
29		support ples: Past due or lump sum alimony, spo	usal support, child supp	ort, maintenance, divorce settlement, property	settlement
		Give specific information			
30		amounts someone owes you bles: Unpaid wages, disability insurance benefits; unpaid loans you made to		nefits, sick pay, vacation pay, workers' comper	nsation, Social Security
	■ No				
	☐ Yes.	Give specific information			
31	_Exam _l	sts in insurance policies ples: Health, disability, or life insurance; l	nealth savings account	(HSA); credit, homeowner's, or renter's insurar	ce
	■ No	Name the incurence company of each p	aliay and list its value		
	□ res.	Name the insurance company of each p Company name:	olicy and list its value.	Beneficiary:	Surrender or refund value:
32	If you	terest in property that is due you from are the beneficiary of a living trust, expendence has died.		ed nsurance policy, or are currently entitled to rece	eive property because
	No				
	☐ Yes.	Give specific information			
33	_Exam _l	s against third parties, whether or not bles: Accidents, employment disputes, in			
	■ No □ Yes	Describe each claim			
					and off alabase
34	. Other ∈	contingent and unliquidated cialms of	every nature, includir	ng counterclaims of the debtor and rights to	set off claims
	☐ Yes.	Describe each claim			
35	_ `	nancial assets you did not already list			
	■ No □ Yes.	Give specific information			
3(the dollar value of all of your entries fr art 4. Write that number here		nny entries for pages you have attached	\$20,169.00
P	art 5: De	scribe Any Business-Related Property You	Own or Have an Interest	In. List any real estate in Part 1.	
37.	Do you	own or have any legal or equitable interest	in any business-related p	property?	
	No. Go	to Part 6.			
	☐ Yes. (Go to line 38.			

Official Form 106A/B Schedule A/B: Property page 4

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Case number (if known) Document Debtor 1 **Shawntora Harvey** Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2 \$0.00 Part 2: Total vehicles, line 5 \$6,000,00 57. Part 3: Total personal and household items, line 15 \$650.00 Part 4: Total financial assets, line 36 \$20,169.00 Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 62. Total personal property. Add lines 56 through 61... \$26,819.00 Copy personal property total \$26,819.00

Official Form 106A/B Schedule A/B: Property page 5

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$26,819.00

		17(7,1111)	· · · · · · · · · · · · · · · · · · ·	
Fill in this infor	mation to identify your	case:		
Debtor 1	Shawntora Harve	ey		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number _				
(if known)				☐ Chec
				amer

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	Which set of exemp	otions are	you claiming?	Check one only	. even if	vour spouse i	s filina with	vou.
----	--------------------	------------	---------------	----------------	-----------	---------------	---------------	------

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Current value of the portion you own	the Amount of the exemption you claim		Specific laws that allow exemption
Copy the value from Schedule A/B	Chec	ck only one box for each exemption.	
\$300.00		\$300.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
\$350.00		\$350.00	735 ILCS 5/12-1001(a)
		100% of fair market value, up to any applicable statutory limit	
\$80.00		\$80.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
\$89.00		\$89.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
\$20,000.00		\$20,000.00	735 ILCS 5/12-1006
		100% of fair market value, up to any applicable statutory limit	
	\$300.00 \$350.00 \$89.00	\$300.00	\$300.00 \$300.00 \$300.00 \$300.00 \$300.00 \$300.00 \$300.00 \$300.00 \$300.00 \$35

Filed 05/05/17 Entered 05/05/17 18:47:27 Document Page 16 of 48 Debtor 1 Shawntora Harvey Case number (if known) 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No

Case 17-14292

Yes

Doc 1

Desc Main

Case	2 17-14292	Doc 1 Filed 05/05 Documen		l 05/05/17 18:4 of <i>4</i> 8	47:27 Desc N	1ain
Fill in this informati	ion to identify you			.,, -,,		
	Shawntora Har	vey Middle Name	Last Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bankro	uptcy Court for the	: NORTHERN DISTRICT C	F ILLINOIS			
Case number(if known)					_	if this is an ded filing
Official Form 1	106D					
Schedule D	: Creditors	s Who Have Clair	ns Secured	by Property	y	12/15
s needed, copy the Ad number (if known). . Do any creditors hav	Iditional Page, fill it	If two married people are filing to out, number the entries, and atta y your property? this form to the court with your	ach it to this form. On	the top of any addition	nal pages, write your na	
■ Yes. Fill in all	of the information	below.		Ç	·	
	ecured Claims					
2. List all secured claims. If a creditor has for each claim. If more than one creditor ha much as possible, list the claims in alphabet		s a particular claim, list the other cr	editors in Part 2. As	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.1 Ally Financia	al	Describe the property that sec	ures the claim:	\$8,020.00	\$6,000.00	\$2,020.00
Po Box 380901 Bloomington, MN 55438 Number, Street, City, State & Zip Code		As of the date you file, the claid apply. Contingent Unliquidated				
Who owes the debt?	Check one.	☐ Disputed Nature of lien. Check all that a	pply.			
■ Debtor 1 only □ Debtor 2 only		An agreement you made (su car loan)		red		
Debtor 1 and Debtor 2 only		Statutory lien (such as tax lie	•			
☐ At least one of the d ☐ Check if this claim community debt		☐ Judgment lien from a lawsuit☐ Other (including a right to off				
Date debt was incurre	Opened 08/12 Last Active 2/01/17	Last 4 digits of accoun	number <u>6765</u>			

Add the dollar value of your entries in Column A on this page. Write that number here: \$8,020.00 If this is the last page of your form, add the dollar value totals from all pages. \$8,020.00 Write that number here:

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

	0000 11 14202 1	Document	Page 18	3 of 48	Desc Main
Fill in t	this information to identify your				
Debtor	1 Shawntora Harve	2 V			
	First Name	Middle Name	Last Name		
Debtor (Spouse		Middle Name	Last Name		
United	States Bankruptcy Court for the:	NORTHERN DISTRICT OF ILL	INOIS		
Case n					☐ Check if this is an amended filing
	al Form 106E/F edule E/F: Creditors W	/ho Have Unsecured	Claims		12/15
any exec Schedul Schedul eft. Atta name ar	cutory contracts or unexpired leases e G: Executory Contracts and Unexp e D: Creditors Who Have Claims Sec ich the Continuation Page to this part ad case number (if known).	s that could result in a claim. Also li bired Leases (Official Form 106G). D cured by Property. If more space is r ge. If you have no information to rep	st executory o o not include needed, copy t	ontracts on Schedule A/B: Prop any creditors with partially secu he Part you need, fill it out, num	red claims that are listed in other the entries in the boxes on the
Part 1:					
_	any creditors have priority unsecure	ed claims against you?			
	No. Go to Part 2.				
	Yes.	TV Harana and Olatina			
Part 2:					
3. Do	any creditors have nonpriority unse	cured claims against you?			
	No. You have nothing to report in this p	part. Submit this form to the court with y	your other sche	dules.	
-	Yes.				
uns	t all of your nonpriority unsecured c secured claim, list the creditor separatel n one creditor holds a particular claim, t 2.	ly for each claim. For each claim listed,	, identify what t	ype of claim it is. Do not list claims	already included in Part 1. If more
					Total claim
4.1	Advocate Medical Group	Last 4 digits of acco	ount number	2101	\$164.67
	Nonpriority Creditor's Name PO Box 92523	When was the debt	incurred?	02/2017	
	Chicago, IL 60675 Number Street City State Zlp Code	•	ile, the claim i	s: Check all that apply	
	Who incurred the debt? Check one. Debtor 1 only				
		☐ Contingent☐ Unliquidated			
	Debtor 2 only				
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIOR	ITY unsecured	l claim:	
	At least one of the debtors and an	D Cturdent learn		· Olamii	
	☐ Check if this claim is for a com debt	munity	g out of a sena	ration agreement or divorce that y	ou did not
	Is the claim subject to offset?	report as priority clair	•	. J	
	No	☐ Debts to pension	or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify	Medical		

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Debt	or 1 Shawntora Harvey		Case number (if know)					
4.2	Bank Of America	Last 4 digits of account number	7307	\$23,872.00				
	Nonpriority Creditor's Name Nc4-105-03-14 Po Box 26012 Greensboro, NC 27410	When was the debt incurred?	Opened 07/07 Last Active 3/08/17					
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	As of the date you file, the claim is: Check all that apply					
	Debtor 1 only	Contingent						
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Unliquidated☐ Disputed						
	☐ At least one of the debtors and another☐ Check if this claim is for a community debt		d claim: aration agreement or divorce that you did not					
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharir	ng plans, and other similar debts					
	☐ Yes	·	Other. Specify Credit Card					
4.3	Bank of America	Last 4 digits of account number	2299	\$489.57				
	Nonpriority Creditor's Name PO Box 660807 Dallas, TX 75266	When was the debt incurred?	2016					
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim						
	Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	Debtor 1 and Debtor 2 only	· · · · · · · · · · · · · · · · · · ·						
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:					
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not					
	■ No		☐ Debts to pension or profit-sharing plans, and other similar debts					
	Yes	■ Other. Specify Line of Cre						
4.4	Chase Card Services Nonpriority Creditor's Name	Last 4 digits of account number	3352	\$8,879.00				
	Po Box 15298 Wilmington, DE 19850	When was the debt incurred?	Opened 10/04 Last Active 3/15/17					
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	As of the date you file, the claim is: Check all that apply					
	■ Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	Debtor 1 and Debtor 2 only	☐ Disputed						
	\square At least one of the debtors and another							
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separate a priority doing.						
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharir	ng plans, and other similar debts					
	☐ Yes	Other. Specify Credit Card						
	■ Other. Specify Cleuit Calu							

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DCDIO	Silawillora Harvey		Case Harriber (II Kilow)		
4.5	Citibank/The Home Depot	Last 4 digits of account number	0679	\$1,256.00	
	Nonpriority Creditor's Name Citicorp Cr Srvs/Centralized Bankruptcy Po Box 790040	When was the debt incurred?	Opened 06/98 Last Active 3/08/17		
	S Louis, MO 63129 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply		
	■ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not		
	No	Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes	■ Other. Specify Charge Acc	count		
4.6	Citicards Cbna Nonpriority Creditor's Name	Last 4 digits of account number	0647	\$5,528.00	
	Po Box 6241 Sioux Falls, SD 57117	When was the debt incurred?	Opened 04/95 Last Active 1/23/17		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply		
	■ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes	Other. Specify Credit Card	<u> </u>		
4.7	Comenity Bank/Carsons Nonpriority Creditor's Name	Last 4 digits of account number	4672	\$2,159.00	
	Po Box 182125 Columbus, OH 43218	When was the debt incurred?	Opened 07/10 Last Active 3/15/17		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply		
	■ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims			
	■ No	Debts to pension or profit-sharing	• •		
	☐ Yes ☐ Other. Specify Charge Account				

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Debtor 1 Shawntora Harvey Case number (if know) 4.8 Unknown **Sears Card** Last 4 digits of account number 1935 Nonpriority Creditor's Name PO Box 6286 When was the debt incurred? 2016 Sioux Falls, SD 57117 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes 4.9 Syncb/Toys "R" Us Last 4 digits of account number 0582 \$97.00 Nonpriority Creditor's Name Opened 07/08 Last Active Po Box 965064 When was the debt incurred? 03/17 Orlando, FL 32896 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No **Credit Card** ☐ Yes Other, Specify 4.1 Synchrony Bank/ JC Penney 3301 \$699.00 Last 4 digits of account number 0 Nonpriority Creditor's Name Opened 07/16 Last Active Attn: Bankruptcy Po Box 956060 When was the debt incurred? 02/17 Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes

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Case number (if know)

Debtor 1 Shawntora Harvey 4.1 Synchrony Bank/Sams 7716 \$2,593.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 07/04 Last Active Po Box 965060 When was the debt incurred? 3/14/17 Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account ☐ Yes Synchrony Bank/Sams Club 6765 \$509.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Opened 01/17 Last Active Po Box 956060 When was the debt incurred? 3/03/17 Orlando, FL 32896 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes Us Dept Of Ed/Great Lakes Higher 4.1 \$25,694.00 8581 Last 4 digits of account number 3 Educati Nonpriority Creditor's Name Attn: Bankruptcy Opened 09/10 Last Active 2401 International Lane When was the debt incurred? 02/17 Madison, WI 53704 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ☐ Other. Specify

Official Form 106 E/F

Educational

Document Page 23 of 48 Debtor 1 Shawntora Harvey Case number (if know) Us Dept Of Ed/Great Lakes Higher 4.1 1577 \$13,810.00 Educati Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Opened 09/09 Last Active 2401 International Lane When was the debt incurred? 02/17 Madison, WI 53704 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify Educational 4.1 Vision Financial Services 8927 \$279.42 Last 4 digits of account number Nonpriority Creditor's Name 01/2016 PO Box 1768 When was the debt incurred? La Porte, IN 46352 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Medical Other. Specify Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Part 4: Add the Amounts for Each Type of Unsecured Claim 6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Total Claim Domestic support obligations** 6a 0.00 Total claims Taxes and certain other debts you owe the government 6b. from Part 1 6b. 0.00 6c. Claims for death or personal injury while you were intoxicated 6c. 0.00 6d. Other. Add all other priority unsecured claims. Write that amount here. 6d. 0.00 Total Priority. Add lines 6a through 6d. 6e. 0.00 **Total Claim** Student loans 6f. 6f 39,504.00

Official Form 106 E/F

Total claims from Part 2

Schedule E/F: Creditors Who Have Unsecured Claims

6g.

Obligations arising out of a separation agreement or divorce that

you did not report as priority claims

0.00

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Debtor 1 Shawntora Harvey

6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.		\$ 46,525.66
6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 86.029.66

Official Form 106 E/F

		Docume	<u>ni – Pade 75 di 48</u>	
Fill in this infor	mation to identify your	case:		
Debtor 1	Shawntora Harve	²y		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				Check if this is
				amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	whom you have the r, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.2	•				
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.3					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.4					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.5					
	Name				
	Number	Street			_
	City		State	ZIP Code	

		Docume	nt Page 26 d	NT 48	
Fill in this in	formation to identify your				
Debtor 1	Shawntora Harve	V			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States	s Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case numbe (if known)	r				☐ Check if this is an amended filing
Schedu Codebtors ar		re also liable for any deb			12/15 ate as possible. If two married eeded, copy the Additional Page,
ill it out, and		boxes on the left. Attach	the Additional Page t		o of any Additional Pages, write
1. Do yo	u have any codebtors? (If	you are filing a joint case,	do not list either spouse	as a codebtor.	
■ No □ Yes					
Arizona, No. G Yes. [California, Idaho, Louisiana, o to line 3. Did your spouse, former spou	Nevada, New Mexico, Pu use, or legal equivalent live	erto Rico, Texas, Wash	ington, and Wisconsin.)	y states and territories include
in line 2	again as a codebtor only i 6D), Schedule E/F (Official	f that person is a guaran	tor or cosigner. Make	sure you have listed th	ne creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	olumn 1: Your codebtor me, Number, Street, City, State and Zl	P Code		Column 2: The cre Check all schedule	editor to whom you owe the debt es that apply:
3.1 Na	ma			Schedule D, line	
INA	me			☐ Schedule E/F, li ☐ Schedule G, line	
Nu Cit	mber Street y	State	ZIP Code	_	
3.2				☐ Schedule D, line	9
Na	me			□ Schedule E/F, li	ine
				☐ Schedule G, line	e
Nu Cit	mber Street y	State	ZIP Code		

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Fill	in this information to	identify your ca	ise:								
Del	btor 1	Shawntora H	larvey			_					
1 -	btor 2 buse, if filing)					_					
Uni	ited States Bankrupto	cy Court for the:	NORTHERN DISTRIC	T OF ILLINOIS		_					
	se number nown)						☐ An				apter
0	fficial Form	<u> 1061</u>					MN	// DD/ Y	YYY		
S	chedule I: Y	our Inco	ome								12/1
sup spo atta	plying correct infor use. If you are sepa ch a separate sheet	mation. If you arated and you	ible. If two married peo are married and not filir r spouse is not filing wi On the top of any addition	ng jointly, and your s th you, do not includ	pouse i le infori	is livir matior	ng with y n about y	ou, incl our spo	ude information	on about yo space is nee	ur eded,
1.	Fill in your emplo information.	yment		Debtor 1			1	Debtor 2	or non-filing	spouse	
If you have attach a se informatio	If you have more th			■ Employed	■ Employed			☐ Emplo	oyed		
	information about a	h a separate page with mation about additional	Employment status	☐ Not employed			I	□ Not e	mployed		
	employers.		Occupation								
	Include part-time, s self-employed work		Employer's name	Elementary School	ool Dis	trict 1	159				
	Occupation may in or homemaker, if it		Employer's address	6202 Vollmer Rd Matteson, IL 604							
			How long employed the	nere?				_			_
Pai	rt 2: Give Deta	ails About Mon	thly Income								
	mate monthly inco		ate you file this form. If y	you have nothing to re	port for	any lir	ne, write S	\$0 in the	space. Include	e your non-fil	ling
If yo	ou or your non-filing s e space, attach a sep	pouse have mo	re than one employer, co	embine the information	for all e	employ	ers for th	nat perso	on on the lines	below. If you	ı need
							For Debt	or 1	For Debtor non-filing s		
2.			y, and commissions (be alculate what the month)		2.	\$_	5,1	97.25	\$	N/A	
3.	Estimate and list	monthly overti	me pay.		3.	+\$_		0.00	+\$	N/A	

4. Calculate gross Income. Add line 2 + line 3.

5,197.25

N/A

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Deb	tor 1	Shawntora Harvey	-	(Case n	umber (if k	nown)				
					For [Debtor 1			ebtor	2 or	
	Cop	by line 4 here	4.		\$	5,19	7.25	\$		N/A	<u> </u>
5.	List	all payroll deductions:									
٠.	5a.	Tax, Medicare, and Social Security deductions	5a	a	\$	1,19	2 12	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b		<u>\$</u> —		0.00	\$		N/A	_
	5c.	Voluntary contributions for retirement plans	50		\$		3.53	\$		N/A	_
	5d.	Required repayments of retirement fund loans	50		\$		0.00	\$		N/A	_
	5e.	Insurance	56	€.	\$		0.00	\$		N/A	_
	5f.	Domestic support obligations	5f		\$		0.00	\$		N/A	
	5g.	Union dues	50	g.	\$		0.00	\$		N/A	<u> </u>
	5h.	Other deductions. Specify:	_ 5h	1.+	\$		0.00	+ \$		N/A	<u>\</u>
6.	Add	I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	1,78	1.65	\$		N/A	<u> </u>
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	3,41	5.60	\$		N/A	<u>.</u>
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total			•						
	٥L	monthly net income.	88		\$		0.00	\$		N/A	_
	8b. 8c.	Interest and dividends Family support payments that you, a non-filing spouse, or a dependent	8b).	\$		0.00	\$		N/A	_
	00.	regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	80	5.	\$	(0.00	\$		N/A	
	8d.	Unemployment compensation	80	d.	\$		0.00	\$		N/A	_
	8e.	Social Security	86	€.	\$		0.00	\$		N/A	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f		\$		0.00	\$		N/A	
	8g.	Pension or retirement income	80	_	\$		0.00	\$		N/A	_
	8h.	Other monthly income. Specify:	_ 8r _	1.+	\$		0.00	+ \$		N/A	<u> </u>
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	S	(0.00	\$		N/	A
10	Cal	culate monthly income. Add line 7 + line 9.	10.	\$	3	,415.60	+ \$		N/A	= \$	3,415.60
		I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		Ψ_		,413.00	• • -		17/7		3,713.00
11.	Star Incli othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not accify:	dep						chedule 11.		0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The reside that amount on the Summary of Schedules and Statistical Summary of Certain lies							12.	\$	3,415.60
13.	Do	you expect an increase or decrease within the year after you file this form	?						'	Combi month	ned ly income
		No.									

Official Form 106I Schedule I: Your Income page 2

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E:11-	in this information	tion to identify	2115 0000						
		tion to identify yo	our case:						
Deb	otor 1	Shawntora H	larvey			Cr	neck if th	nis is: mended filing	
Deb	otor 2						A su	oplement show	wing postpetition chapter
(Spo	ouse, if filing)						13 ex	openses as of	the following date:
Unit	ted States Bankr	uptcy Court for the	: NORTH	IERN DISTRICT OF ILLIN	IOIS		MM /	DD / YYYY	
	se number								
(If k	nown)								
O.	fficial Fo	rm 106J							
		J: Your	Exper	ISAS					12/1
Be info	as complete a	and accurate as	possible eded, atta	. If two married people a ch another sheet to this					or supplying correct
Par 1.	t 1: Descr Is this a joir	ibe Your House	hold						
٠.	■ No. Go to								
			in a separ	ate household?					
	□N	0	-						
	□ Y	es. Debtor 2 mus	st file Offici	al Form 106J-2, Expense	s for Separate House	hold of D	ebtor 2.		
2.	Do you have	e dependents?	□ No						
	Do not list Do Debtor 2.	ebtor 1 and	■ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor			ependent's ge	Does dependent live with you?
	Do not state				0				□ No
	dependents	names.			Son			•	■ Yes □ No
					Daughter		1	2	■ Yes
					Son		1	4	□ No ■ Yes
							_ ·	<u> </u>	■ res □ No
_	_								☐ Yes
3.	expenses o	penses include f people other t d your depende	han \square	No Yes					
Par		ate Your Ongoi							
exp				uptcy filing date unless y y is filed. If this is a sup					
				government assistance sluded it on Schedule I:					
(Of	ficial Form 10	161.)					_	Your exp	enses
4.		or home owners and any rent for th		ses for your residence.	Include first mortgage	e 4.	\$		1,500.00
	If not includ	led in line 4:							
	4a. Real e	estate taxes				4a.	\$		0.00
		rty, homeowner's	s, or renter	's insurance		4b.	\$		0.00
				upkeep expenses		4c.	. —		0.00
5		owner's associat		dominium dues our residence. such as ho	ome equity loans	4d. 5	\$ \$		0.00

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Debtor 1 Shav	wntora Harvey	Case num	ber (if known)	
6. Utilities:				
	ricity, heat, natural gas	6a.	\$	200.00
	r, sewer, garbage collection	6b.	·	0.00
	phone, cell phone, Internet, satellite, and cable services	6c.		350.00
	r. Specify:	6d.		0.00
	nousekeeping supplies	7.	·	600.00
	and children's education costs	7. 8.	\$	
		o. 9.	*	0.00
•	aundry, and dry cleaning		\$	25.00
	are products and services	10.	· -	50.00
	d dental expenses	11.	\$	0.00
	ttion. Include gas, maintenance, bus or train fare.	12.	\$	200.00
	ide car payments. ent, clubs, recreation, newspapers, magazines, and books	13.	·	
			·	0.00
	contributions and religious donations	14.	\$	0.00
5. Insurance.	ide insurance deducted from your pay or included in lines 4 or 20.			
15a. Life in	, , ,	15a.	¢	50.00
	h insurance	15a. 15b.	·	50.00
			·	0.00
	cle insurance	15c.	·	70.00
	r insurance. Specify:	15d.	\$	0.00
	not include taxes deducted from your pay or included in lines 4 or 20.		•	
Specify:		16.	\$	0.00
	t or lease payments:	47-	c	407.00
	payments for Vehicle 1	17a.	·	427.00
	payments for Vehicle 2	17b.	·	0.00
17c. Other		17c.	·	0.00
17d. Other	· · · · · · · · · · · · · · · · · · ·	17d.	\$	0.00
	ents of alimony, maintenance, and support that you did not report		\$	0.00
	rom your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106 nents you make to support others who do not live with you.	i). 10.	ф •	0.00
Specify:	ments you make to support others who do not live with you.	19.	Ψ	0.00
	property expenses not included in lines 4 or 5 of this form or on So		vur Incomo	
20a Morto	gages on other property	20a.		0.00
	estate taxes	20b.		0.00
			·	
	erty, homeowner's, or renter's insurance	20c.	·	0.00
	tenance, repair, and upkeep expenses	20d.		0.00
	eowner's association or condominium dues	20e.	·	0.00
 Other: Spe 	cify:	21.	+\$	0.00
Calculate v	your monthly expenses			
-	nes 4 through 21.		\$	3,472.00
	ine 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-	.2	\$	3,472.00
		_	·	0.470.05
22c. Add lin	e 22a and 22b. The result is your monthly expenses.		\$	3,472.00
3. Calculate v	our monthly net income.		L	
-	line 12 (your combined monthly income) from Schedule I.	23a.	\$	3,415.60
	your monthly expenses from line 22c above.	23b.	·	3,472.00
_55. Сору	,	200.		3,712.00
23c. Subtr	ract your monthly expenses from your monthly income.			
	result is your monthly net income.	23c.	\$	-56.40
4. Do you exp	pect an increase or decrease in your expenses within the year after	you file this	form?	
For example,	do you expect to finish paying for your car loan within the year or do you expect y			se or decrease because o
	to the terms of your mortgage?			
No.				
☐ Yes.	Explain here:			

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Fill in this inf	formation to identify your	case:			
Debtor 1	Shawntora Harve				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number (if known)					☐ Check if this is an amended filing
Official Fo	orm 106Dec				
Declara	ation About a	n Individual	Debtor's Sc	hedules	12/15
years, or both	ney or property by fraud ir n. 18 U.S.C. §§ 152, 1341, 1 Sign Below		ruptcy case can result i	in fines up to \$250,000	0, or imprisonment for up to 20
Did you	pay or agree to pay some	one who is NOT an attor	ney to help you fill out b	pankruptcy forms?	
■ No					
☐ Yes	s. Name of person				ruptcy Petition Preparer's Notice, and Signature (Official Form 119)
that they	enalty of perjury, I declare are true and correct. Shawntora Harvey	that I have read the sum	x	d with this declaration	,
	wntora Harvey ature of Debtor 1		Signature of	Debtor 2	

Date _____

Date May 5, 2017

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Fill ir	this i <u>nform</u>	ation to identify you	r case:			
Debto		Shawntora Harv				
		First Name	Middle Name	Last Name		
Debto (Spous	or 2 e if, filing)	First Name	Middle Name	Last Name		
Unite	d States Ban	kruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
		aptoy Court to the				
(if know	number				_	Check if this is an mended filing
Offi	cial For	m 107				
			Affairs for Indivi	duals Filing for E	Bankruptcy	4/16
inforn	nation. If mo er (if known	ore space is needed,). Answer every que	attach a separate sheet to	this form. On the top of an	equally responsible for sup y additional pages, write you	
1. V	Vhat is your	current marital statu	ıs?			
	■ Married □ Not marr	ied				
2. C	Ouring the la	st 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes. List	all of the places you I	ived in the last 3 years. Do n	ot include where you live nov	ν.	
I	Debtor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	ddress:	Dates Debtor 2 lived there
					nity property state or territory ico, Texas, Washington and W	
	■ No □ Yes. Mal	ke sure vou fill out <i>Scl</i>	nedule H: Your Codebtors (C	official Form 106H).		
Part 2		the Sources of You	`	,		
4. C	oid you have	any income from en amount of income yo	nployment or from operation of the contraction of the contract	ng a business during this y all businesses, including part re together, list it only once u		ndar years?
	_	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until I for bankruptcy:	■ Wages, commissions, bonuses, tips	\$15,591.76	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

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Page 33 of 48 Case number (if known) Debtor 1 Shawntora Harvey

					Debtor 1					Debtor 2		
					Sources	of income that apply.	(be	oss income efore deductions clusions)	and	Sources of incommendation Check all that approximately		Gross income (before deductions and exclusions)
			ar year: Jecember 3	31, 2016)	■ Wages bonuses,	s, commissions, tips		\$126,85	2.00	☐ Wages, combonuses, tips	missions,	
					☐ Operat	ing a business				☐ Operating a l	ousiness	
			ar year bef Jecember 3		■ Wages bonuses,	s, commissions, tips		\$123,76	9.00	☐ Wages, combonuses, tips	missions,	
					☐ Operat	ing a business				☐ Operating a l	ousiness	
	and oth winning List each	ner p gs. If ch so o	ublic benefi you are filir	t payments; ng a joint cas ne gross inco	pensions; re e and you h		rest; di you re	ividends; money ceived together,	collecte list it on	ed from lawsuits; ly once under De	royalties; and btor 1.	curity, unemployment, I gambling and lottery
					Debtor 1					Debtor 2		
					Sources of Describe b		eac (be	oss income fro ch source efore deductions clusions)		Sources of incomposition Describe below.		Gross income (before deductions and exclusions)
Par	t 3: L	List (Certain Pay	ments You	Made Befo	re You Filed for	Bankr	ruptcy				
6.	□ No	o. es.	Neither De individual puring the suring the Suring No. Suring Yes * Subject to Debtor 1 o	btor 1 nor D rimarily for a 90 days befo Go to line 7 List below e paid that cre not include to adjustment	ebtor 2 has personal, for re you filed ach credito editor. Do n payments to on 4/01/19	amily, or househol for bankruptcy, di r to whom you pai	umer of ld purplished you lid a too lots for this bar is after umer of the lates and the lates after the lates after umer of the lates after lates after the lates after lates	debts. Consume cose." pay any creditor tal of \$6,425* or domestic supponkruptcy case. that for cases fidebts.	r a total of more in ort obligatiled on o	of \$6,425* or mor one or more pay tions, such as ch r after the date of	e? ments and th ild support ar adjustment.	(8) as "incurred by an e total amount you and alimony. Also, do
			■ No.	Go to line 7	•	1 77	Í	, , ,		·		
			□ Yes	List below e	ach credito ments for d							creditor. Do not aclude payments to an
	Credit	tor's	Name and	Address		Dates of payme	ent	Total amo	unt aid	Amount you still owe	Was this pa	ayment for

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Case number (if known) Debtor 1 Shawntora Harvey

7.	Within 1 year before you filed for bankrupt Insiders include your relatives; any general profession of which you are an officer, director, person in a business you operate as a sole proprietor. Alimony.	artners; relatives of any gencontrol, or owner of 20%	neral partners; partners or more of their voting	erships of which yog g securities; and a	ou are a genera iny managing a	al partner; corporations gent, including one for
	■ No					
	☐ Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cost		yments or transfer a	any property on a	account of a d	ebt that benefited an
	No					
	☐ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment litor's name
Pal	rt 4: Identify Legal Actions, Repossessio	ns, and Foreclosures				
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details.	/ cases, small claims action	ns, divorces, collectio	on suits, paternity a	actions, suppor	t or custody
	Case title Case number	Nature of the case	Court or agency		Status of th	ne case
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details belo No. Go to line 11. Yes. Fill in the information below. Creditor Name and Address			Date		Value of the
		Explain what happene	ed			property
11.	Within 90 days before you filed for bankru accounts or refuse to make a payment bed No Yes. Fill in the details. Creditor Name and Address		•	Date	action was	amounts from your Amount
				take	n	
	Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a ■ No □ Yes List Certain Gifts and Contributions		erty in the possess	ion of an assigne	ee for the bene	efit of creditors, a
	Within 2 years before you filed for bankrup	otey did you give any gif	ts with a total value	of more than \$60	00 ner nerson	?
13.	■ No □ Yes. Fill in the details for each gift.	otcy, did you give any gir	is with a total value	of more than so	oo per person	·
	Gifts with a total value of more than \$600 per person	Describe the gifts	3	Date the g	s you gave gifts	Value
	Person to Whom You Gave the Gift and Address:					

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Page 35 of 48 Case number (if known) Document Debtor 1 Shawntora Harvey 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed **Charity's Name** Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? ☐ Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Yes. Fill in the details. Person Who Was Paid Description and value of any property Amount of Date payment Address transferred or transfer was payment **Email or website address** made Person Who Made the Payment, if Not You **VLO PC** 4/26/2017 \$999.00 3818 S Harlem Lyons, IL 60534 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. Nο Yes. Fill in the details. **Person Who Was Paid** Description and value of any property Date payment Amount of Address transferred payment or transfer was made 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No

Address

Description and value of

property transferred

Describe any property or

paid in exchange

payments received or debts

Yes. Fill in the details. **Person Who Received Transfer**

Person's relationship to you

Date transfer was

made

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Debtor 1 **Shawntora Harvey**

	thin 40 and hafana (the differ hands			16 41 .					
	neficiary? (These are often called asset-prot		ly property to a	i seit-settle	d trust or similar device	of which you a	ire a		
	No								
	Yes. Fill in the details.								
Na	ame of trust	Description and v	alue of the pro	perty trans	sferred	Date Transfe	er was		
t 8:	List of Certain Financial Accounts. Inst	truments. Safe Deposit	t Boxes, and S	torage Unit	s				
	,,,,,,,,,,				.•				
sol Inc	d, moved, or transferred? lude checking, savings, money market, or	r other financial accou	nts; certificate:	s of deposi					
	No								
П									
			_						
Ac	ddress (Number, Street, City, State and ZIP	•	· · · · · · · · · · · · · · · · · · ·		t or Date account was closed, sold, moved, or transferred				
		ear before you filed for	bankruptcy, a	ny safe dep	posit box or other depos	sitory for secur	ities,		
	No								
$\overline{}$	***								
ш	res. Fill in the details.								
				Describe	the contents	Do you sti have it?	ill		
Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?									
	No								
П									
_	res. Fill ill the details.								
		to it?	to it? Address (Number, Street, City,			Do you sti have it?	ill		
t 9:	Identify Property You Hold or Control f	or Someone Else							
		neone else owns? Inclu	ude any propei	ty you bor	rowed from, are storing	for, or hold in t	rust		
	No								
	Yes. Fill in the details.								
٥	unar's Nama	Where is the prop	orty?	Describe	the property		Value		
				Describe	the property		value		
t 10	Give Details About Environmental Info	rmation							
the	purpose of Part 10, the following definitio	ns apply:							
tox	ic substances, wastes, or material into the	e air, land, soil, surface	e water, ground	• .			ous or		
	ber	No Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) Have you stored property in a storage unit of the purpose of Part 10, the following definition the purpose of Part	No Yes. Fill in the details. Name of trust Description and volumber, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Who else has or I to it? Address (Number, Street, City, State and ZIP Code) Personance of Storage Facility Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Owner's Name Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Owner's Name Address (Number, Street, City, State and ZIP Code) Environmental Raw means any federal, state, or local statute or regitoxic substances, wastes, or material into the air, land, soil, surface	Description and value of the process. No Yes. Fill in the details. Name of trust Description and value of the process. Within 1 year before you filed for bankruptcy, were any financial accounts or instruction of the process. Within 1 year before you filed for bankruptcy, were any financial accounts or instructed checking, savings, money market, or other financial accounts; certificater houses, pension funds, cooperatives, associations, and other financial institution No Yes. Fill in the details. Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) Who else had access to it? Address (Number, Street, City, State and ZIP Code) Have you stored property in a storage unit or place other than your home within 1 No Yes. Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) Who else has or had access to it? Address (Number, Street, City, State and ZIP Code) Who else has or had access to it? Address (Number, Street, City, State and ZIP Code) United the details of a detail of the details of a det	beneficiary? (These are often called asser-protection devices.) No No Service in in the details. Name of trust Description and value of the property transfer of the property transfer of the property transfer of the property of the property transfer of the property of the property transfer of the property of the pr	beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details. Name of trust Description and value of the property transferred No Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for yold, moved, or transferred? No No Yes. Fill in the details. Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Storage Facility No Yes. Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Describe the contents No Pescribe the contents Describe the contents No Pescribe the property pounded from, are storing for someone. No Pescribe the property pounded from, are storing for someone. No Pescribe the property pounded from, are storing	Name of trust Description and value of the property transferred made Set List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, cle sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, broke houses, pension funds, cooperatives, associations, and other financial Institutions. No No No No No No No No No N		

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

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Debtor 1 Shawntora Harvey

24.	Has any governmental unit notified you that y	ou may be liable or potentially liable	under or in violation of an environme	ental law?		
	Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice		
25.	Have you notified any governmental unit of a	ny release of hazardous material?				
	■ No □ Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice		
26.	Have you been a party in any judicial or admi	nistrative proceeding under any envir	onmental law? Include settlements a	ind orders.		
	■ No □ Yes. Fill in the details.					
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case		
Par	11: Give Details About Your Business or Co	onnections to Any Business				
27.	Within 4 years before you filed for bankruptcy	y, did you own a business or have any	of the following connections to any	business?		
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time					
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)					
	☐ A partner in a partnership					
	☐ An officer, director, or managing executive of a corporation					
	☐ An owner of at least 5% of the voting or equity securities of a corporation					
	No. None of the above applies. Go to Part 12.					
	Yes. Check all that apply above and fill in the details below for each business.					
		Describe the nature of the business	Employer Identification number			
	Address (Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Do not include Social Security r	number or ITIN.		
28.	Within 2 years before you filed for bankruptcy institutions, creditors, or other parties.	y, did you give a financial statement to	o anyone about your business? Inclu	de all financial		
	■ No □ Yes. Fill in the details below.					
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued				

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Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Shawntora Harvey Signature of Debtor 2 Shawntora Harvey Signature of Debtor 1 Date May 5, 2017 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? ■ No ☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this inform	ation to identify your	2250:				
Debtor 1	Shawntora Harve	Middle Name		Last Name		
Debtor 2	First Name	Middle Nome		Lost Namo		
(Spouse if, filing)		Middle Name	TD10T 05 11 1	Last Name		
United States Bank	kruptcy Court for the:	NORTHERN DIST	TRICT OF ILL	INOIS		
Case number						Charle if this is an
(II KIIOWII)						☐ Check if this is an amended filing
						amenaea ming
Official For	m 100					
			.:	Filing Under Ob		•
Statemen	t of intentio	n tor inaiv	<u>/iduais</u>	Filing Under Ch	apter i	12/15
If you are an indiv	idual filing under chap	oter 7. vou must fil	I out this form	n if:		
	claims secured by yo		. out tillo loll	·· ···		
	d personal property a					
whicheve	er is earlier, unless th			bankruptcy petition or by the use. You must also send copic		
on the fo	orm					
	pple are filing together I date the form.	in a joint case, bo	th are equally	y responsible for supplying co	orrect inform	ation. Both debtors must
Be as complete ar	nd accurate as possib	le. If more space is	s needed, atta	ich a separate sheet to this fo	orm. On the t	op of any additional pages.
	ur name and case nun					r and an and a second page 2,
Part 1: List You	ur Creditors Who Have	Secured Claims				
	re that you listed in Br	ort 1 of Schodulo D): Craditars M	/ho Have Claims Secured by F	Proporty (Off	icial Form 106D) fill in the
information belo	ow.			•		iciai Forni 100D), illi ili tile
Identify the cred	ditor and the property th	nat is collateral	What do you	ou intend to do with the prope debt?	erty that	Did you claim the property as exempt on Schedule C?
Creditor's All	y Financial		☐ Surrend	er the property.		□ No
name:			_	the property and redeem it.		- v
Description of	2012 Dodge Charg	er 138000		ne property and enter into a mation Agreement.		■ Yes
property	miles		_	ne property and [explain]:		
securing debt:						
Part 2: List You	ur Unexpired Persona	Property Leases				
For any unexpired	personal property lea	ase that you listed	in Schedule	G: Executory Contracts and U	Jnexpired Le	ases (Official Form 106G), fill
				es are leases that are still in e pes not assume it. 11 U.S.C. §		se period has not yet ended.
Describe your un	expired personal prop	nerty leases			Will	the lease be assumed?
_	onphioa porocinal proj	,orty routes				
Lessor's name: Description of leas	ed					No
Property:	ocu					Yes
					_	
Lessor's name:	ed					No
Description of leas Property:	ocu					Yes
					_	
Lessor's name:						No

Statement of Intention for Individuals Filing Under Chapter 7

Official Form 108

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Del	otor 1	Shawntora Harvey	Case number (if known)	
Des	ecrintio	n of leased		
	perty:	ii oi leaseu		☐ Yes
	ssor's n			□ No
Description of leased Property:		n of leased		☐ Yes
	sor's n			□ No
	scription perty:	n of leased		☐ Yes
Lessor's name: Description of leased Property:				□ No
		n of leased		☐ Yes
	sor's n			□ No
	scriptioi perty:	n of leased		☐ Yes
Par	rt 3:	Sign Below		
		alty of perjury, I declare tha nat is subject to an unexpire	have indicated my intention about any property of my estate that see	cures a debt and any personal
χ		hawntora Harvey	X	
^	Shav	wntora Harvey	Signature of Debtor 2	
	Signa	ature of Debtor 1		
	Date	May 5, 2017	Date	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-14292 Doc 1 Filed 05/05/17 Entered 05/05/17 18:47:27 Desc Main Document Page 45 of 48

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

In re	Shawntora Harvey		Case No).		
		Debtor(s)	Chapter	7		
	DISCLOSURE OF COM	PENSATION OF ATTO	RNEY FOR I	DEBTOR(S)		
(Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. compensation paid to me within one year before the rendered on behalf of the debtor(s) in contempla	e filing of the petition in bankruptcy,	or agreed to be pa	id to me, for services		
	For legal services, I have agreed to accept		\$	999.00		
	Prior to the filing of this statement I have rece	ived	\$	999.00		
	Balance Due		\$	0.00		
2.	The source of the compensation paid to me was:					
	■ Debtor □ Other (specify):					
3.	The source of compensation to be paid to me is:					
	■ Debtor □ Other (specify):					
4.	■ I have not agreed to share the above-disclosed	compensation with any other person	unless they are me	mbers and associates	of my law firm.	
	☐ I have agreed to share the above-disclosed com- copy of the agreement, together with a list of the				law firm. A	
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:					
1	a. Analysis of the debtor's financial situation, and b. Preparation and filing of any petition, schedules c. Representation of the debtor at the meeting of c d. Representation of the debtor in adversary proce c. [Other provisions as needed] Negotiations with secured creditors reaffirmation agreements and applic 522(f)(2)(A) for avoidance of liens o	s, statement of affairs and plan which reditors and confirmation hearing, are dings and other contested bankruptors to reduce to market value; executions as needed; preparation	n may be required; and any adjourned he by matters; emption plannin	earings thereof; g; preparation and	I filing of	
5.]	By agreement with the debtor(s), the above-disclos	ed fee does not include the following	g service:			
		CERTIFICATION				
this b	certify that the foregoing is a complete statement ankruptcy proceeding.	of any agreement or arrangement for	payment to me fo	r representation of the	debtor(s) in	
M	ay 5, 2017	/s/ Hanna Kayali				
	ate	Hanna Kayali Signature of Attorne VLO, P.C. 3818 S. Harlem Lyons, IL 60534 312-600-7000 Fa docs@victorylaw Name of law firm	x: 708-777-1638			

United States Bankruptcy CourtNorthern District of Illinois

		1 (of the District of Innions		
In re	Shawntora Harvey		Case No.	
		Debtor(s)	Chapter 7	
	VI	ERIFICATION OF CREDITOR M	IATRIX	
		Number of	Creditors:	16
	The above-named Debtor(s (our) knowledge.	s) hereby verifies that the list of credit	tors is true and corre	ect to the best of my
	May 5, 2017	/s/ Shawntora Harvey		

Advocate Medical Group PO Box 92523 Chicago, IL 60675

Ally Financial Po Box 380901 Bloomington, MN 55438

Bank Of America Nc4-105-03-14 Po Box 26012 Greensboro, NC 27410

Bank of America PO Box 660807 Dallas, TX 75266

Chase Card Services Po Box 15298 Wilmington, DE 19850

Citibank/The Home Depot Citicorp Cr Srvs/Centralized Bankruptcy Po Box 790040 S Louis, MO 63129

Citicards Cbna Po Box 6241 Sioux Falls, SD 57117

Comenity Bank/Carsons Po Box 182125 Columbus, OH 43218

Sears Card PO Box 6286 Sioux Falls, SD 57117

Syncb/Toys "R" Us Po Box 965064 Orlando, FL 32896 Synchrony Bank/ JC Penney Attn: Bankruptcy Po Box 956060 Orlando, FL 32896

Synchrony Bank/Sams Po Box 965060 Orlando, FL 32896

Synchrony Bank/Sams Club Attn: Bankruptcy Po Box 956060 Orlando, FL 32896

Us Dept Of Ed/Great Lakes Higher Educati Attn: Bankruptcy 2401 International Lane Madison, WI 53704

Us Dept Of Ed/Great Lakes Higher Educati Attn: Bankruptcy 2401 International Lane Madison, WI 53704

Vision Financial Services PO Box 1768 La Porte, IN 46352